

# SON/SOI Office Files

\*\*\*\* OFFICE - DISPLAY \*\*\*\*

**FUNCTION\_**

**AGENCY** U. S. Office of Personnel Management **CODE** OM20 **TYPE** S  
**NAME** Federal Investigations Processing Center **86 AGR: Y** **85P AGR: M**  
**ADDRESS** P O Box 618 **86 SI: 24** **85P SI:**  
**CITY** Boyers **ST** PA **Telephone Numbers:**  
**COUNTRY** **ZIP** 16018-0618 **Commercial:** (724) 794-  
**ALC:** 111111111 **Fax:** (724) 794-2981

SE AUTHORIZED CONTACT	SSN	ASID	TYPE	DATE
C				
CHRIS DEMATTEIS	345-72-3345	BI		
NORMA	222-34-5567	PR		11/1/1996
SANDY MCCALL	444-67-8899	PRI		8/11/1996

**COMMENTS**

(1) OFFICE (2) CONTACTS Y (3) SOI ACCESS (4)  
CORR SOI  
(5) INSTRUCTIONS Y (6) EXPANDED SCREENING

(SOI label/code: ) \_\_\_\_\_

**U. S. Office of Personnel Management**  
**Investigations Service**  
**Federal Investigations Processing Center**  
**PO Box 618**  
**Boyers, PA 16018-0618**  
**Commercial 724 794-5612 FAX 724 794-**

**SECURITY OFFICE IDENTIFIER (SOI) AUTHORIZATION AND AMENDMENT**

**ATTENTION: SECURITY OFFICER**

OPM authorizes each agency Security Office a 4-character identifier, called the SOI. The SOI permits OPM to return investigative reports to agency-approved addresses. The SOI also permits security offices to obtain detailed investigative information. The Security Office must provide OPM-FIPC the following:

- ☒ An accurate mailing address for the Security Office;
- ☒ Name and social security numbers for authorized callers;
- ☒ Type and date of most recent background investigation conducted on the authorized caller.

To request an SOI or advise OPM of SOI changes, complete the necessary items on the form below. Mail or fax the completed form to the address on the top of this form, attention Program Services Office (PSO). For additional information and/or assistance, call OPM-FIPC, PSO at 724 794-5612.

**1. ☐ Check this block if requesting a new SOI**

**2. ☐ Change/add agency name and/or address (include zip code):**

Agency Name: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**3. ☐ Change/add security office telephone numbers:**

Commercial: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Extension: \_\_\_\_\_ Commercial: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Extension: \_\_\_\_\_

**4. ☐ Change/add Online Payment And Collection (OPAC) Agency Location Code (ALC):**

Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Extension: \_\_\_\_\_

**5. ☐ Change/add security officer:**

Name: \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type/Date of last investigation: \_\_\_\_\_

**6. ☐ Delete authorized Callers:**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**7. ☐ Add Authorized Callers:**

**a.** Name: \_\_\_\_\_ **b.** Name: \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Type/Date of last investigation: \_\_\_\_\_ Type/Date of last investigation: \_\_\_\_\_

**c.** Name: \_\_\_\_\_ **d.** Name: \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Type/Date of last investigation: \_\_\_\_\_ Type/Date of last investigation: \_\_\_\_\_

**SOI Security Officer Signature:** \_\_\_\_\_

(SON label/code:) \_\_\_\_\_

**U. S. Office of Personnel Management**  
**Investigations Service**  
**Federal Investigations Processing Center**  
**PO Box 618**  
**Boyers, PA 16018-0618**  
**Commercial 724 794-5612 FAX 724 794-**

**SUBMITTING OFFICE NUMBER (SON) AUTHORIZATION AND AMENDMENT**

**ATTENTION: PERSONNEL  
OFFICER**

OPM authorizes an SON for each Personnel Office that submits investigation requests and to make case status requests. The SON data is used to mail a variety of investigative notices, and to contact a submitting office to clarify information that may otherwise delay an investigation. OPM-FIPC must have current information on:

- ☒ Agency name and mailing address; and
- ☒ Name, position, and phone numbers of a contact person.

To request an SON or advise OPM of SON changes, complete the necessary items on the form below. Mail or fax the completed form to the address on the top of this form, attention Program Services Office (PSO). For additional information and/or assistance, call OPM-FIPC, PSO at 724 794-5612.

1. SON: \_\_\_\_\_ ☐ Check this block if requesting a new SON

2. SOI: \_\_\_\_\_

3. ☐ Change/add Online Payment And Collection (OPAC) Agency Location Code (ALC): \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Extension: \_\_\_\_\_

4. ☐ Change/add Agency Name/Address:

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

5. ☐ Add Contact Person:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

6. ☐ Delete Contact Person:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

7. ☐ Change/add SON Contact telephone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Extension: \_\_\_\_\_

3

*This form should be duplicated as needed*

# Billing Rates for DoD

FY 2000 Case Billing Rates for the Department of Defense

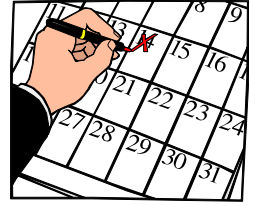
October 6, 1999

Case Type	Timeliness	Case Type/ Service Code	FY00 Price	Comments:
SSBI	75 Day Service	30B	\$2,695	Due to anticipated volume, 35 Day Service is NOT routinely available. This service may be requested for special circumstances by contacting your OPM representative. The billing rate for 35 Day Service is \$2,995.
	120 Day Service	30C	\$2,595	
*SBIPR	180 Day Service	18F	\$1,795	Due to anticipated volume, 120 Day Service is NOT routinely available. Expedited service may be requested for special circumstances by contacting your OPM representative.
*ANACI	75 Day Service	09B	\$165	Expedited service not routinely available
*NACLC	75 Day Service	08B	\$145	Expedited service not routinely available
Special Interviews	N/A	N/A	\$375	Additional charge applied to any investigation shown above when developed information requires Subject recontact for expanded information.

\*The SBIPR, ANACI, and NACLC provided for the Department of Defense includes routine expansion to resolve issues consistent with the Defense Security Service (DSS) Decision Logic Table (DLT). Prices have been adjusted from OPM's regular price schedule to include this expansion.

The OPM SSBI does not require expansion to meet the requirements of the DSS DLT. Prices quoted are OPM's standard advertised prices.

# Automated Fingerprint Processing



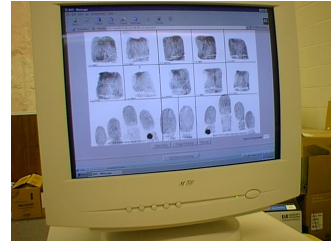
- **July 1999, the FBI Criminal Justice Information Services Division (CJIS) implemented the Integrated Automated Fingerprint Identification System (IAFIS).**

- **November 29, 1999, OPM began to transmit all hard card submissions to IAFIS through OPM's Fingerprint Transaction System (FTS).**
  - Scanned (live scan or card scan) fingerprints can be electronically transmitted; hard cards are mailed to OPM.

## **How it**

- **works:** Electronically transmitted fingerprints are received by FTS and subject data uploads automatically into PIPS.
- All fingerprints sent to FBI are in digitized form.
- Mailed fingerprints are data entered in PIPS, a file transferred to FTS, and hard cards scanned.
- receive 24 hour processing.

# Automated Fingerprint Processing



## The benefits are:

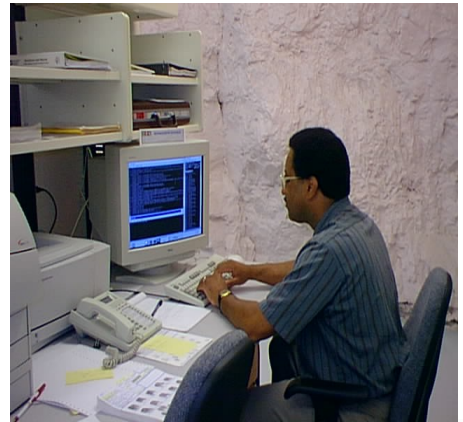
- ▣ Reduction in processing time from weeks to hours for the fingerprint based criminal history check.
- ▣ Arrest records received electronically, allowing for electronic transmission with closed investigations and are
- ▣ Eliminates “lost” fingerprint submissions; available much earlier in the investigative process.
- ▣ Enhances classification process
- ▣ OPM central processing system reduces or eliminates agency investment in imaging equipment, each submitting office can determine which format best meets its needs:
  - ▣ hard card
  - ▣ card scan
  - ▣ live scan
- ▣ All images are stored until response received from the FBI--
  - ▣ can be retransmitted without reprinting

# **FBI Certified Systems**

- **FBI developed Image Quality Specifications (IQS) for the capturing and transmission, and printing of digitized fingerprints.**
- **Anyone interested in purchasing Live Scan or Cardscan equipment should check with the FBI to get their list of certified products. Their WEB address is...*WWW.FBI.gov/iafis* or call *202 324-9341*.**
- **All procurements should require that vendors meet the ANSI/NIST and EFTS (version 6.2 or later) specifications outlined by the FBI.**

# Fingerprint Transaction System (FTS)

The FTS is OPM's system that was developed to allow OPM's customers to take advantage of the enhancements IAFIS offers.



## ***Results to Date:***

Prints sent through FTS (12/99 to present): ***484,701***

Timeliness of Results: ***9 hours 27 min.***

Unclassifiable Rate: ***5%***

Average Timeliness results to agency: ***5 days***



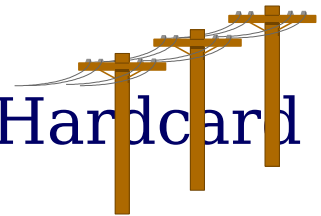
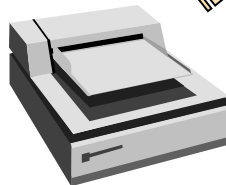
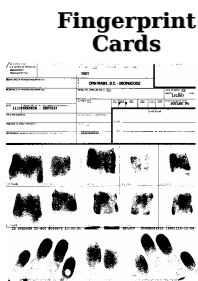
# FINGERPRINT SUBMISSION FORMATS

## ➤ HARDCARD:

May be Ink/Roll or Chemical Method

## ➤ CARDSCAN:

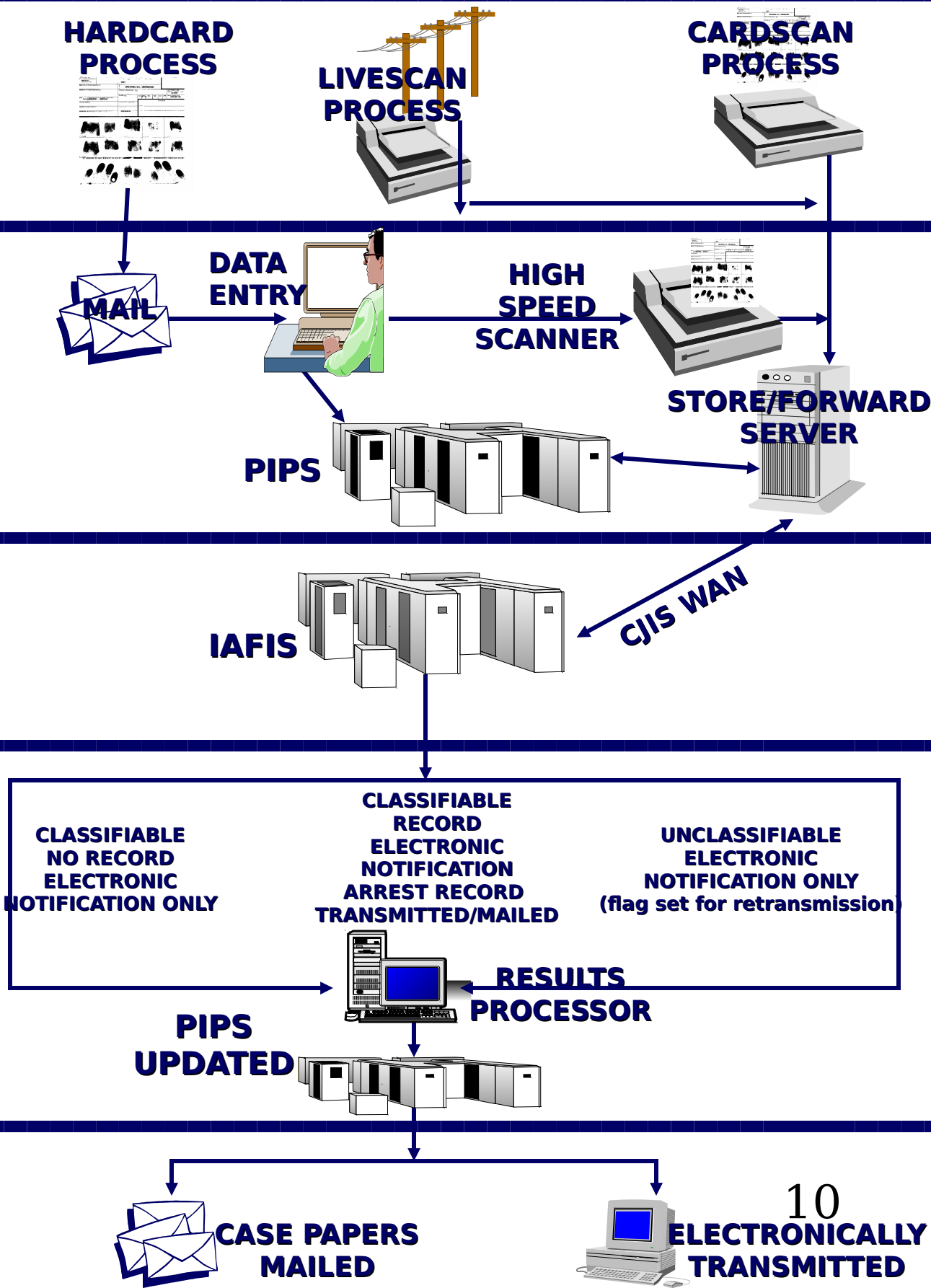
Scanned Image of a Hardcard



## ➤ LIVESCAN:

Digital Technology for Capturing Fingerprints (no paper)

SON  
OPM  
ISCJS  
OPM  
IS  
SOI



# CASE PROCESSING

## □ Receipt.....4 hrs.

*Mail is delivered by 6:00 a.m. each day and opened within 4 hrs.*



## □ Screening.....

*If the request contains missing or discrepant information*

*a phone call will be made to the submitting office to obtain information; we will give SON 3 days to get information to make case acceptable*



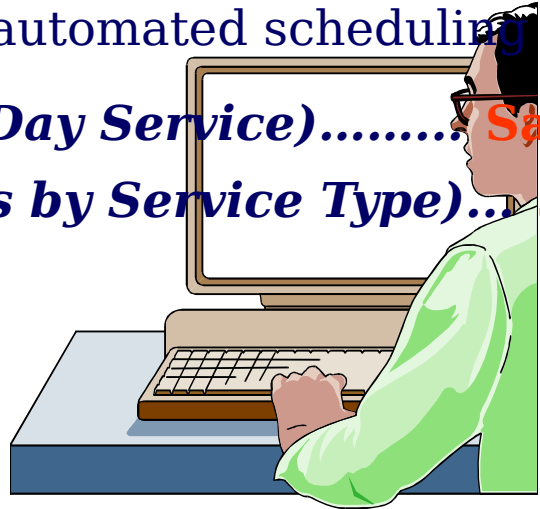
# CASE PROCESSING

## ▮ **Data Entry**.....

Information from Standard Form or EPSQ is data entered and key verified for automated scheduling

***Priority Workloads (35 Day Service).....*** Same I

***Other Workloads (Varies by Service Type)...*** 3-5 D



## ▮ **Scheduling**.....

Scheduling process happens automatically that evening



# CASE PROCESSING

## Case Control.....

The case is in pending status for completion of 3rd party information, timeliness varies by type of information pending



## Closeout.....

The case is closed and sent to Security Office

HR FORM 126 (2-78)  
U.S. OFFICE OF PERSONNEL  
MANAGEMENT (5 CFR 734)

**REPORT OF AGENCY ADJUDICATIVE ACTION  
ON OPM PERSONNEL INVESTIGATIONS  
U.S. Government Use Only**

ATTACHED TO THIS FORM IS INVESTIGATIVE MATERIAL COMPILED BY OPM  
ON THE FOLLOWING PERSON:

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_  
SSN: \_\_\_\_\_ POSITION: \_\_\_\_\_ SENSITIVITY: \_\_\_\_\_  
AGENCY: \_\_\_\_\_

USING PROCEDURES ESTABLISHED BY 5 CFR 731, PERSONNEL, SUITABILITY,  
OPM HAS MADE THE FOLLOWING CASE ISSUE CHARACTERIZATION:

CASE	TYPE	CHAR
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DATE OF OPM DETERMINATION: \_\_\_\_\_

UNDER THE PROVISIONS OF 5 CFR 731 AND 732, YOU ARE REQUIRED TO REPORT  
TO OPM YOUR FINAL ADJUDICATION ACTION. SEND COMPLETED FORM TO:

UNITED STATES OFFICE OF PERSONNEL MANAGEMENT  
FEDERAL INVESTIGATIONS PROCESSING CENTER  
PO BOX 418  
BOYERS, PA 16018-0418

MARK THE CIRCLE CORRESPONDING TO THE ADJUDICATIVE ACTION YOU TOOK  
ALONG WITH THE CIRCLE 5 TO THE RIGHT CORRESPONDING TO THE DATE OF ADJUDICATION.  
For the oval completely. Do not make any stray marks on this form.

(1) PROBABLE DETERMINATION WAS MADE. (Person was contacted.)  
(2) PROBABLE DETERMINATION WAS MADE. (Could not find any available names.)  
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(100) PROBABLE DETERMINATION WAS MADE. (Person was contacted.)

DATE OF ADJUDICATION: \_\_\_\_\_

MONTH: \_\_\_\_\_ DAY: \_\_\_\_\_ YEAR: \_\_\_\_\_

PLEASE NOTE: IF ADDITIONAL DOCUMENTATION (SUCH AS AGENCY CONDUCTED INQUIRY,  
BUE PROCEEDS, ETC.) WAS USED TO ADJUDICATE THE CASE, ALL COPIES OF THAT DOCUMENTATION  
SHOULD BE ATTACHED TO THIS FORM AND FORWARDED TO THE ADDRESS SHOWN ABOVE.

ADJUDICATED BY: \_\_\_\_\_ (PLEASE PRINT) DATE: \_\_\_\_\_

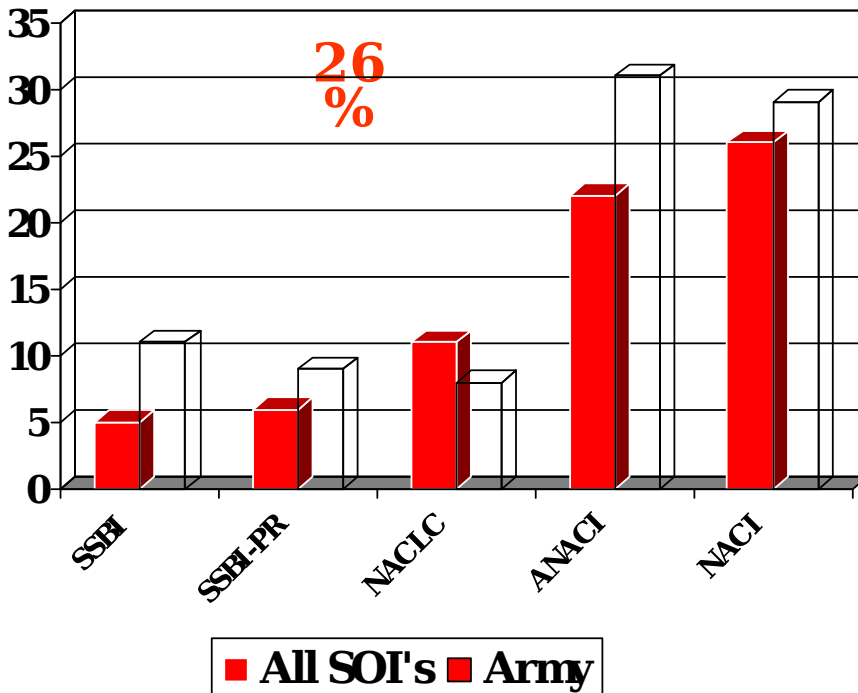
SIGNATURE OF ADJUDICATING OFFICIAL: \_\_\_\_\_ TELEPHONE NO. ( ) \_\_\_\_\_

# Submission

## Quality

Percentage of Submissions  
Rejected as Unacceptable (FY 00):

	All SOI's	Army
SSBI:	5%	11%
SSBI-PR:	6%	9%
NACLC:	11%	8%
ANACI:	22%	31%
NACI:	26%	29%



# Submission Quality

## Reasons for

### Rejections:

#### All SOI's

#### Army

16.5%

15.7 %

8%

6.6%

3.4%

6.0%

2.2%

4.7%

8.8%

9.1%

52.4%

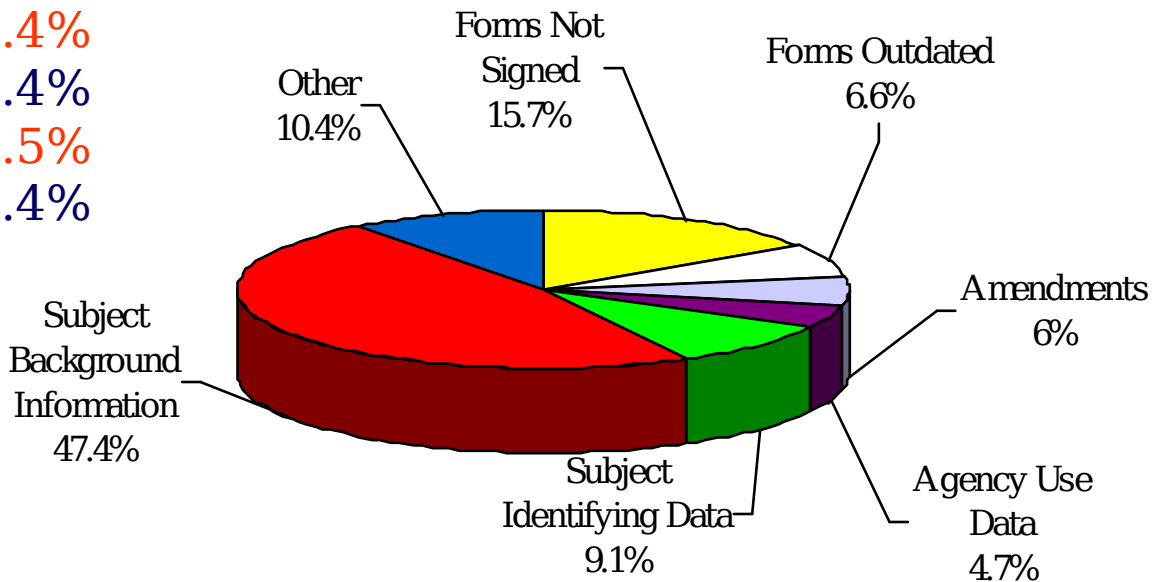
47.4%

8.5%

10.4%

Required Forms not signed, dated, or submitted  
Submitted forms outdated  
Amendments requiring subject certification  
Agency Use Block information incomplete  
Subject identifying data missing or discrepant  
Subject background information missing or  
Other

#### (Army Data FY 00)



# PIPS Unacceptable Report

UNITED STATES OFFICE OF PERSONNEL MANAGEMENT  
INVESTIGATIONS SERVICE  
FEDERAL INVESTIGATIONS PROCESSING CENTER  
BOYERS, PA 16018-0618

REPORT OF UNACCEPTABLE CASE SUBMISSIONS  
FROM: 10/01/1999 THRU 09/30/2000

SON:  
D/ARMY

WASHINGTON, DC 20310-6800

AT THE REQUEST OF THE SON IDENTIFIED ABOVE, THE FOLLOWING STATISTICS  
COVERING UNACCEPTABLE CASE SUBMISSIONS THAT HAVE NOT BEEN RESOLVED BY  
TELEPHONE CONTACT ARE PROVIDED FOR THE PERIOD SHOWN. IF THIS REPORT IS  
NO LONGER REQUIRED, PLEASE CONTACT FIPC-PSO AT (224)794-5612.

	SF85	SF85P	SF86	OPY84C	TOTAL
NACI/ANACI REC	42	20	184	0	246
UNACCEPTABLE	18 (43%)	11 (55%)	71 (39%)	0 ((0%))	100 (41%)
SACI/SAC REC	0	0	0	0	0
UNACCEPTABLE	0 ((0%))	0 ((0%))	0 ((0%))	0 ((0%))	0 ((0%))
NAC/NACLC REC	0	1	553	0	554
UNACCEPTABLE	0 ((0%))	1 100%	144 (26%)	0 ((0%))	145 (26%)
BI'S REC	0	0	205	0	205
UNACCEPTABLE	0 ((0%))	0 ((0%))	26 (13%)	0 ((0%))	26 (13%)

	REASONS FOR REJECTION				
1A	6	3	23	0	32
1B	1	0	15	0	16
1C	0	2	11	0	13
1D	0	0	0	0	0
1E	1	2	17	0	20
1F	0	0	0	0	0
1G	0	0	0	0	0
1H	0	0	0	0	0
1I	0	0	0	0	0
1J	1	0	0	0	1
1K	2	3	21	0	26
1L	0	0	1	0	1
2A	2	4	27	0	33
2B	1	0	4	0	5
2C	0	0	0	0	0
3A	2	1	13	0	16
3B	0	0	25	0	25
4A	5	7	55	0	67
4B	4	1	13	0	18
4C	4	4	97	0	105
5	4	2	35	0	41

SEE UNACCEPTABLE CASE NOTICE EXPLANATION FORM ATTACHED



# Unacceptable Case Notice

SON: \_\_\_\_\_  
TYPE: \_\_\_\_\_

PO BOX 618  
BOYERS, PA 16018-0618

## ..... UNACCEPTABLE CASE NOTICE .....

The attached forms were received from your agency for initiation of a personnel investigation. These papers require correction and/or completion as indicated below. Accurate correction or completion of the items marked will prevent further delays of the investigation. If you have any questions please call 412-794-5612. Please return this form with your completed case papers to the address shown above.

IF THE INVESTIGATION IS NO LONGER REQUIRED, RETAIN THE CASE PAPERS IN YOUR FILES AND COMPLETE THE INFORMATION IN THE AGENCY USE BLOCK ON THE REVERSE SIDE OF THIS FORM AND RETURN IT TO THE ADDRESS SHOWN ABOVE.

SUBJECT: \_\_\_\_\_ DATE/STAFF ID: \_\_\_\_\_  
LAST FIRST MIDDLE

### 1. CASE PAPERS - Reference Standard Form 85 \* RSP \* 86 \* 171 or Equivalent \* 87 \* FD258

- \_\_\_\_\_ A. ( ) Not Submitted
- \_\_\_\_\_ B. ( ) Not Signed Page(s) \_\_\_\_\_
- \_\_\_\_\_ C. ( ) Not Dated Page(s) \_\_\_\_\_
- \_\_\_\_\_ E. \* \* \* Form does not meet our current date requirements.  
Please update residence, employment etc... RE-SIGN and RE-DATE appropriate forms.
- \_\_\_\_\_ \* \* \* Form will not meet our current date requirements.  
Please update residence, employment etc... RE-SIGN and RE-DATE appropriate forms.
- \_\_\_\_\_ F. Incorrect version of the fingerprint chart submitted for processing. Submit: (SF87) / (FD258).
- \_\_\_\_\_ G. Fingerprints will not be accepted by the FBI due to: \_\_\_\_\_
- \_\_\_\_\_ H. Obsolete version of the SF 171 application submitted for processing.
- \_\_\_\_\_ I. OPM kept OFI 79 for recordation of your investigation onto our system. Do Not submit another OFI 79.
- \_\_\_\_\_ J. Incorrect version of standard form submitted.
- \_\_\_\_\_ K. Please have the subject initial amendments made to: \_\_\_\_\_ (See reverse side of form)
- \_\_\_\_\_ L. Please submit an OFI-36 for foreign born spouse or immediate family member(s).

### 2. AGENCY USE BLOCK - Reference Standard Form \_\_\_\_\_

- \_\_\_\_\_ A. Item(s) \_\_\_\_\_ require completion.
- \_\_\_\_\_ B. Response in item(s) \_\_\_\_\_ not valid.
- \_\_\_\_\_ C. See attached Army Directive, Item 4.

### 3. SUBJECT IDENTIFYING DATA - Reference Standard Form \_\_\_\_\_

- \_\_\_\_\_ A. Item(s) \_\_\_\_\_ require completion.
- \_\_\_\_\_ B. \_\_\_\_\_ is discrepant: \_\_\_\_\_ or \_\_\_\_\_ . Please correct all forms.

### 4. SUBJECT BACKGROUND DATA - Reference Standard Form \_\_\_\_\_ Page(s) \_\_\_\_\_

- \_\_\_\_\_ A. ( ) Item: \_\_\_\_\_ require completion.
- \_\_\_\_\_ ( ) Item: \_\_\_\_\_ require completion.
- \_\_\_\_\_ ( ) Item: \_\_\_\_\_ require completion.
- \_\_\_\_\_ B. Complete mailing addresses, city, state, and ZIP Codes, required in item(s): \_\_\_\_\_

- \_\_\_\_\_ C. \* \* \* The following periods of RESIDENCE are unaccounted for in item \_\_\_\_\_ :  
From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

- \_\_\_\_\_ \* \* \* The following periods of EMPLOYMENT are unaccounted for in item \_\_\_\_\_ :  
From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

### 5. OTHER: \_\_\_\_\_

FIPC 45A - (REV 6/94)